SCMS Requirements Proposal Form				
	d by Management System Owner)			
Date of Proposal: Management System: Management Sy		ement System Ov	vner:	
Requirement Number, Ti	tle, and Date:			
Requirement Source and	Description:			
Requirement Justification: See Continuation Sheet (A				
Proposed/Suggested App	licability of the Requirement			
SC Federal Organization	s?			
SC Contractors?				
Is Requirement Mandato	ry (Required by Law or Regulation)	or Discretionary?	Mandatory	Discretionary
If Mandatory, Deadline for Implementation:				
if Mandatory, Deadline f	or implementation:			
ICD's and a second by	or C'A A or I a c'a			
If Discretionary, Cost-benefit Analysis:				
MSO Signature and Date Signed:				
Part B (To Be Completed	l by SCMS Operations Center)			
Date Received by SCMS Operations Center:				
Date Sent to SCMS Police Part C (To Be Completed	by SCMS Policy Gatekeeper)			
Upon completion return	to SCMS Operations Center with cop	by to MSO		
Response: Fully Approved for E	ntry into SCMS as a Requirement			
Conditionally Approved for Entry into SCMS as a Requirement Required Conditions for Approval:				
1	11			
Rejected/Not Approve	ed for Entry into SCMS as a Require	ment		
	•			
Further Action/Information Required from MSO Action/Information Required by MSO:				
	1			
Comments:				
COMO D 1' C 1	G' 1D : G' 1			
SCIMS Policy Gatekeepe	r, Signature and Date Signed:			